Restoration of Rights: Application for More Serious Offenses

About the Rights Restoration Process:

Persons who have been convicted of a *violent offense*, an offense against a minor, or an election law offense must use this form to apply for restoration of rights (a detailed list of more serious offenses is available at www.commonwealth.virginia.gov/ror).

To apply for restoration of rights, you must:

- Have been convicted of a felony in a Virginia court or a U.S. District court
- Be free from any sentence served and/or supervised probation and parole for a minimum of three years.
- Not have any felony convictions in the three years immediately preceding the application and/or pending criminal charges

The Secretary of the Commonwealth will conduct a criminal history check on all applicants.

The civil rights restored through this process include the rights to:

- ✓ Register to vote
- ✓ Hold public office
- ✓ Serve on a jury
- ✓ Serve as a notary public.

The restoration of rights does not restore the right to possess a firearm. You must petition the appropriate Circuit Court pursuant to Va. Code §18.2-308.2. It also does not expunge a criminal charge, which can only be done by petitioning a Circuit Court pursuant to Va. Code §§19.2-392.1 and 19.2-392.2.

This is not a pardon. A person who has been convicted of a felony must first have his or her rights restored in order to be eligible to petition for a simple pardon.

If you have questions about your eligibility, contact the Restoration of Rights Office at (804) 692-0104.

Mail your Application to:

Restoration of Rights Secretary of the Commonwealth P. O. Box 2454 Richmond, VA 23218

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Please print or type the complete information in each blank. If a question does not apply, put "N/A" in the blank. Attach certified copies of all required documents to this application.

	A.	Legal Name Now Used	Please Print):
	В.	Name as Convicted (Ple	ase Print):
	C.	Gender: Male	Female
	D.	Date of Birth:	Social Security Number:
	E.	Mailing Address:	
	F.	City and State:	
	G.	Home Phone:	Work Phone:
	Н.	Cell Phone:	Email (If any):
	Felc	ony Offense(s):	
Court:			County/State:
D	ate(s	s) of Conviction:	Date(s) of Sentence:
Date of Release from Incarceration (If Applicable):			Date of Release from Supervised Probation or Parole:
Ī	-	ation Check List ertain you have included	he following:
	The application, completely filled out (It is important that you list <u>each</u> felony conviction on the application)		
	Certified copies of all felony sentencing orders		
	A current letter from your most recent Probation or Parole officer/office outlining your period of supervision. This letter should be addressed to the Governor, c/o Secretary of the Commonwealth, and may be mailed with your application or mailed directly from the Probation/Parole office. If your officer has retired or is no longer working in that office, call the Probation/Parole office that you reported to and explain to them that you are applying to have your rights restored. They will know what type of letter to provide.		